

Skagit County Auditor 1/23/2015 Page

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PETER BROWNING, DIRECTOR HOWARD LEIBRAND, M.D., HEALTH OFFICER CORINNE STORY, ENVIRONMENTAL HEALTH SUPERVISOR PHONE: (360) 336-9380 FAX: (360) 336-9401

OPERATION-MAINTENANCE & MONITORING REQUIREMENT FOR PROPRIETARY ONSITE SEWAGE SYSTEMS

This form must be recorded before permit approval

NOTICE OF ON-SITE SEWAGE SYSTEM MAINTENANCE AGREEMENT REQUIREMENT

(DESIGN)

GRANTOR: (NAME OF OWNER) FIRE DISTRICT #13 LACHNER 98257

GRANTEE: SKAGIT COUNTY

ADDRESS_

8652 STEVENSON RD. ANACORTES

PARCEL #_P/9865 LEGAL DESCRIPTION:

OF THE SWIM SELY BEGINNING AT WE COR SAID SUBDIVISION, 589.6' TO PT. BEGIN, 5 417.4' E277', NAI7.4' W277' EXCEPT STEVENSON RD. ALONG NORTH LINE OF PROPERTY.

THE FOLLOWING INFORMATION HAS BEEN DISCLOSED TO THE HOMEOWNER AS PER SKAGIT COUNTY CODE 12.05.120 AND WASHINGTON ADMINISTRATIVE CODE 246-272A-0015 and 0270:

- 1. Maintenance & Monitoring Required: The septic system to be installed on this lot will require annual or more frequent as required scheduled maintenance and monitoring.
- 2. Contract Required: A contract for perpetual maintenance and monitoring must be obtained before the onsite sewage disposal system is put into use.
- 3. Maintenance Specialist Required: The person performing this service must be certified by the Skagit County Health Department.

I have read and fully understand the conditions contained within this notification. For witnessing or attesting a signature: State of Washington, County of Skagit

(Owner signature) Church Walland date 1-71-13

Signed or attested before me on 1-31-15 by (Signature of Notary)

date [-3]-15 My appointment expires 01 - 64 - 301

